



Department of Medical Assistance Services
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<http://www.dmas.state.va.us>

MEDICAID MEMO

TO: Providers of Intellectual Disability (ID), Individual and Family Developmental Disabilities Support (IFDDS) and Day Support (DS) Waiver Services in the Virginia Medical Assistance Program

FROM: Cynthia B. Jones, Director
Department of Medical Assistance Services (DMAS)

MEMO: Special
DATE: 6/23/2016

SUBJECT: Delayed Implementation of Redesigned Developmental Disabilities Waivers

This memo provides information about a delayed implementation of the three redesigned Developmental Disabilities (DD) Waivers: Community Living, Family and Individual Supports and Building Independence Waivers.

The target date for implementation of the three redesigned Home and Community Based Services DD waivers has been moved from July 1, 2016 to August 1, 2016. The delay is due to notification from the Centers for Medicare and Medicaid Services (CMS) that additional time is required to review the Commonwealth's amendments to the three DD waivers. With this delay, the following can be expected:

Services

- Services and supports provided through the Intellectual Disability (ID) Waiver; Individual and Family Developmental Disabilities Support (IFDDS) Waiver; and Day Support (DS) Waiver will continue as they currently operate.
- Prevocational services will continue to be provided until the implementation of the redesigned waivers.
- All new waiver services approved by the General Assembly for a July 2016 start date will be delayed until the implementation of the redesigned waivers. These services include: Community Coaching, Community Engagement, Workplace Assistance, Independent Living Supports, Shared Living, Supported Living, Community Based Crisis Supports, Center-based Crisis Supports, Crisis Supports Services, Electronic Home-Based Services, and Private Duty Nursing.

Entry into Waiver Services

- Effective July 1, 2016, Community Service Boards (CSBs) will assume the responsibility for being the single point of entry for all individuals with DD. This means individuals who require screening for the IFDDS Waiver will need to go through the CSBs to request a screening.

- All waiver slots will continue to be assigned based on existing processes. CSBs will follow current procedures for ID and DS waiver slots. DBHDS will continue to assign IFDDS waiver slots in accordance with the existing processes.

Rates

- The implementation of the tiered reimbursement structure for new and existing services will be delayed. Various residential services (e.g., group home and sponsored residential) as well as other services (e.g., group day and community engagement,) will require a tiered reimbursement schedule.
- **General Assembly rate increases to the following existing waiver services will be delayed until August 1, 2016, pending CMS approval of the rate methodology:**
 - Companion Services
 - In-Home Residential Services
 - Personal Assistance Services
 - Respite Services
 - Skilled Nursing
 - Therapeutic Consultation

A separate Medicaid Memo will be issued prior to August 1, 2016 to let stakeholders know if the rate changes will occur on August 1st.

Service Authorization

- **For IFDDS Waiver service authorizations, KEPRO will transition service authorization functions to DBHDS effective July 1, 2016. Please reference the May 17th and 18th Medicaid Memos on this topic.**
- IDOLS will remain active for service authorization for the ID and DS waivers.
- Work on the new Waiver Management System (WaMS) will continue. The delayed implementation will permit time for additional training and testing. WaMS will not be used for service authorization until the waiver amendments are approved by CMS.

General

- FEi Systems will still open their help desk on July 1, 2016 for users who will be enrolling in the system or who have accessed the online training materials and have questions. The FEi Systems WaMS Helpdesk toll-free number which will be available July 1, 2016 is 1-844-482-9267.
- Weekly stakeholder calls will continue as scheduled. More information will be provided during this time.

ADDITIONAL INFORMATION ON THE MEDICAID WAIVER REDESIGN:

DBHDS website

<http://www.dbhds.virginia.gov/individuals-and-families/developmental-disabilities/my-life-my-community>

COMMONWEALTH COORDINATED CARE

Commonwealth Coordinated Care (CCC) is a managed care program that is coordinating care for thousands of Virginians who have both Medicare and Medicaid and meet certain eligibility requirements. Please visit the website at http://www.dmas.virginia.gov/Content_pgs/altc-home.aspx to learn more.

MANAGED CARE PROGRAMS

Many Medicaid individuals are enrolled in one of the Department's managed care programs (Medallion 3.0, CCC and PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan/PACE provider may utilize different prior authorization, billing, and reimbursement guidelines than those described for Medicaid fee-for-service individuals. For more information, please contact the individual's managed care plan/PACE provider directly.

Contact information for managed care plans/PACE providers can be found on the DMAS website for each program as follows:

- Medallion 3.0: http://www.dmas.virginia.gov/Content_pgs/mc-home.aspx
- Commonwealth Coordinated Care (CCC): http://www.dmas.virginia.gov/Content_pgs/mmfa-isp.aspx
- Program of All-Inclusive Care for the Elderly (PACE):
http://www.dmas.virginia.gov/Content_atchs/ltc/PACE%20Sites%20in%20VA.pdf

VIRGINIA MEDICAID WEB PORTAL

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, payment status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: www.virginiamedicaid.dmas.virginia.gov. If you have any questions regarding the Virginia Medicaid Web Portal, please contact the Xerox State Healthcare Web Portal Support Help desk toll free, at 1-866-352-0496 from 8:00 a.m. to 5:00 p.m. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

KEPRO PROVIDER PORTAL

Providers may access service authorization information including status via KEPRO's Provider Portal at <http://dmas.kepro.com>.

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:00 a.m. to 5:00 p.m., except on holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.